FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0076

Expires: May 31, 2005 Estimated average burden hours per response. . . . 16.00



03027716

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

SEC USE ONLY UNIFORM LIMITED OFFERING EXEMPTION I

				THOMSON	
				FINANCIAL	
<u>-</u> `		· ·	ged, and indicate c	hange.)	
Series A Convertible Preferred	l Stock Purchase Offerir	ıg			
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Filing Under (Check box(es) that apply):					
Type of Filing: New	Filing	ment			
	A. B	ASIC IDENTIFIC	CATION DATA	<	< JUX & 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
Name of Offering (
Name of Offering (
LURHQ Corporation					
Address of Executive Offices	(Number and Stre	et, City, State, Zip C	ode)	Telephone Numb	per (Including Area Code)
4033 Hwy 501 West, P.O. Box	50667, Myrtle Beach, Se	outh Carolina 2957	9	(843) 903-1076	
Address of Principal Business O	perations (Numbe	er and Street, City, St	ate, Zip Code)	Telephone Numb	per (Including Area Code)
(if different from Executive Offi	ces)				· ·
Brief Description of Business:					
Network Security Services					
Type of Business Organization				11	RECD S.E.U.
☑ corporation	☐ limited partner	ship, already formed	□ othe	r (please specify):	
☐ business trust	🗖 limite	ed partnership, to be	formed		(11) 9 0 20142
		Month Year			JUL FL WON
Actual or Estimated Date of Inco	orporation or Organization	n: 0 9	10121	🗷 Actual 🗆 Esti	mated
Care of Offering Clack it this is an amendment and name has changed, and indicate change. Care of Convertible Preferred Stock Purchase Offering					
•	-				

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

the issuer;	and director of corp	porate issuers and of corpora	•		f a class of equity securities of rship issuers; and
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Prince, Tony D.	01 1 10				
Business or Residence Addi	•				
4033 Highway 501 West, F				E Division	T 0 1 1/
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Prince, Renee					
Business or Residence Add	ress (Number and S	treet, City, State, Zip Code)		
4033 Highway 501 West, l	P.O. Box 50667, M	yrtle Beach, South Caroli	na 29579	······	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Maclean, Richard					
Business or Residence Add c/o Frontier Fund I, L.P.,	· ·				
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Frontier Fund I, L.P.	if individual)				
Business or Residence Add	ress (Number and S	treet, City, State, Zip Code)		
1900 South Boulevard, Su	ite 300, Charlotte,	North Carolina 28203			
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, Crutchfield, Edward E.	if individual)	,			
Business or Residence Add	rass (Number and S	tract City State 7in Code			
401 Tryon Street, Suite 28	-)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Check box(es) that Apply.	Li i iomotei	Deliciteial Owner	L'Acculive Officer	L Director	Managing Partner
Full Name (Last name first,	if individual)	······································			Managing Lautier
Business or Residence Add	ress (Number and S	treet, City, State, Zip Code)		
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				-
Business or Residence Add	ress (Number and S	treet, City, State, Zip Code))		

Enter the information requested for the following:

Each promoter of the issuer, if the issuer has been organized within the past five years;

	VI 1913			B. IN	FORMAT	ION ABO	UT OFFE	RING		I I BUR	对事件 。	Andrews.
						<u> </u>					Yes	No
1.	Has the issue	sold, or do	es the issue			n-accredite x, Column 2,			ring?	•••••	. 🗆	×
2.	What is the m	inimum inv	estment that	t will be a	ccepted fro	m any indi	vidual?				. \$ <u>N</u>	lone
					-	•					Yes	No
3. Does the offering permit joint ownership of a single unit?										×		
. (Enter the info commission of offering. If a and/or with a associated per	or similar r person to state or sta	emuneratior be listed is ites, list the	n for solic an associ name of	citation of ated person the broker	purchasers n or agent or dealer.	in connect of a broke If more t	ction with a er or dealer han five (5)	sales of se registered persons t	ecurities in with the S o be listed	the SEC	
Full	Name (Last n	ame first, if	individual)									
Busi	ness or Resid	ence Addres	ss (Number	and Street	, City, Stat	e, Zip Cod	e)					
Nam	e of Associate	ed Broker o	r Dealer					. , , , , , , , , , , , , , , , , , , ,				
State	s in Which Po	erson Listed	Has Solicit	ed or Inte	nds to Soli	cit Purchas	ers	<u> </u>			<u> </u>	
(Che	ck "All States] [AK]	or check in [AZ]	individual S [AR]	tates) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	□ All S [HI]	States [ID]
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[GA]	[MS]	[MO]
[MT]		[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI] [SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full 1	Name (Last n	ame first, if	individual)									
Busin	ness or Reside	ence Addres	s (Number	and Street	, City, State	e, Zip Code	e)					
Nam	e of Associate	ed Broker o	r Dealer									
State	s in Which Pe	erson Listed	Has Solicit	ed or Inter	nds to Solid	cit Purchas	ers			<u></u>		
(Che	ck "All States] [AK]	or check in [AZ]	individual S [AR]	tates) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	□ All S [HI]	[ID]
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]		[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Last n	ame IIrst, II	individual)									
Busin	ness or Reside	ence Addres	s (Number	and Street	, City, State	e, Zip Code	e)					
Nam	e of Associate	ed Broker o	r Dealer				, . · · · · ·					
State	s in Which Pe	erson Listed	Has Solicit	ed or Inte	nds to Soli	cit Purchas	ers					
(Che	ck "All States	" or check i	ndividual S	tates)							□ All S	States
[AL]] [AK]	[AZ]	[AR]	[ĆA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT]		[IA] [VV]	[KS] [NH]	[KY] [NJ]	[LA] [MM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
[RI]		[NV]	[NA] [TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity		
	☐ Common ☑ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify)		
:	Total		
2.	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on		
	the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
!	Accredited Investors	2	\$ 1,350,000.00
!	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1.		
		Type of	Dollar Amoun
	Type of offering	Security	Sold
	Rule 505		\$
:	Regulation A	_	\$
	Rule 504		
	Total		\$
	10141		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	C	\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ _
	Accounting Fees		
	Engineering Fees		S
	Sales Commissions (specify finders' fees separately)		
•	Other Expenses (identify)		
	T-4-1	_	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS b. Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer." \$ 1,350,000.00 Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C—Question 4.b above. Payments to Officers, Directors Payments to Others & Affiliates Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another Working capital......□ \$ ■ \$ 1,350,000.00 □ \$_____ □ \$____ Column Totals......□ \$_____ 🗵 \$ 1,350,000.00 Total Payments Listed (column totals added) ቜ \$ 1,350,000.00 D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)

LURHQ Corporation

Signature

July 17, 2003

Name of Signer (Print or Type)

Tony D. Prince

Title of Signer (Print or Type)

President

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1.	Is any party described in 17 CFR 230.262 preserule?	ently subject to any of the disqualification provisions of su	ch	Yes □	No ⊠	
	See Append	lix, Column 5, for state response.				
2.	The undersigned issuer hereby undertakes to fu CFR 239.500) at such times as required by state	rnish to any state administrator of any state in which this relaw.	notice is filed, a notic	e on Forn	n D (17	
3.	The undersigned issuer hereby undertakes to fofferees.	urnish to the state administrators, upon written request, i	nformation furnished	by the is	ssuer to	
4.	Offering Exemption (ULOE) of the state in wh	ich this notice is filed and understands that the issuer clair				
		contents to be true and has duly caused this notice to be si	gned on its behalf by	the unde	rsigned	
	ne of Signer (Print or Type) ny D. Prince	Title of Signer (Print or Type) President				

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

REST1:527501.v1 304142-20

APPENDIX

1	2		3			4		5 Disqualification		
	non-ac	to sell to credited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
			Common Stock	Number of Accredited		Number of Non-Accredited				
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA				:						
СТ										
DE										
DC										
FL										
GA										
HI										
ID										
IL			<u> </u>							
ΙN										
IA										
KS										
KY										
LA										
ME										
MD										
MA										
MI							i			
MN										
MS										
MO										

1	2 3			4					5		
	non-ac-	to sell to credited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Common Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
MT											
NE											
NV											
NH											
NJ											
NM											
NY											
NC		X	Preferred Stock (\$1,350,000.00)	2	\$1,350,000.00	0	0		X		
ND											
ОН											
OK											
OR											
PA											
RI											
SC											
SD											
TN											
TX											
UT											
VT											
VA											
WA							:				
WV											
WI											
WY											
PR											